•	SEC Form 4														
	FORM 4	UNITED STAT	NITED STATES SECURITIES AND EXCHANGE COMMISSION												
			Washington, D.C. 20549		OMB APPROVAL										
	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).		NT OF CHANGES IN BENEFICIAL OWNE	RSHIP	OMB Number: 3235-0287 Estimated average burden hours per response: 0.5										
			or Section 30(h) of the Investment Company Act of 1940												
	1. Name and Address of Reporting Person [*] Baumgartner Florian		2. Issuer Name and Ticker or Trading Symbol <u>CIMPRESS plc</u> [CMPR]	5. Relationship of Re (Check all applicable) Director	eporting Person(s) to Issuer e) 10% Owner										
	(Last) (First) C/O CIMPRESS PLC, FIRST FLOO	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 08/09/2024	Officer (give below)											
	FINNABAIR BUSINESS & TECHN		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint Line)	. Individual or Joint/Group Filing (Check Applicable ine)										

(Street) DUNDALK, CO. LOUTH, **IRELAND**

Rule 10b5-1(c) Transaction Indication

(City) (State)

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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Person

Form filed by One Reporting Person

Form filed by More than One Reporting

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

		•			,					
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)	ction	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Performance Share Units ⁽¹⁾	\$0	08/09/2024		Α		56,800		08/15/2024	08/15/2027 ⁽²⁾	Ordinary Shares	56,800	\$ <u>0</u>	56,800	D	

Explanation of Responses:

1. Performance share unit (PSU) award granted on August 15, 2023 with performance conditions based on the revenue, adjusted EBITDA, and unlevered free cash flow of Cimpress' Vista business for the fiscal year ended June 30, 2024. On August 9, 2024, the Compensation Committee determined the number of shares issuable pursuant to this PSU award based on the level of achievement against the performance conditions 2. These PSUs vest over a four year period: 25% of the original number of shares vest on the Exercisable Date show in Table II and 6.25% vest per quarter thereafter.

Remarks:

/s/Kathryn L. Leach, as attorney-in-fact for Florian Baumgartner

08/13/2024

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

(Zip)

 * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.